

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

19-921 Rule 4.2

Kroger, Inc.
c/o Corp. Service Co. (Stat. Agent)
50 West Broad Street, Suite 1330
Columbus, OH 43215



9590 9402 5149 9122 5882 82

2. Article Number (Transfer from service label)

7019 0700 0002 0328 6188

A. Signature

RESERVED
Corporation Service Company

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

NOV 22 2019

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

Deanne E. Schausell
Agent

3. Service Type

☐ Adult Signature
☒ Adult Signature Restricted Delivery

☐ Certified Mail®
☐ Certified Mail Restricted Delivery

☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

☐ Mail
☐ Mail Restricted Delivery (0)

☐ Priority Mail Express®

☐ Registered Mail™

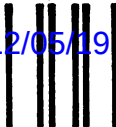
☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

USPS TRACKING#



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 5149 9122 5882 82

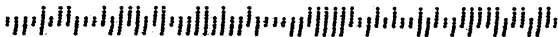
United States
Postal Service

RECEIVED

NOV 6 2019

RICHARD W. NAGEI
Clerk of Court
CINCINNATI, OHIO

S. Southern District of Ohio
Western Division
100 E. Fifth St., Room 103
Cincinnati, OH 45202
ATTN: CLERK OF COURTS



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

19-921 Rule
4.2

Kroger, Inc.
Blue Ash Technology Center
9997 Carver Rd.
Blue Ash, OH 45242



9590 9402 5149 9122 5882 99

2. Article Number (Transfer from service label)

7019 0700 0002 0328 6195

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Handwritten Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Tara Murphy

C. Date of Delivery

11-22-19

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

Mail Restricted Delivery
(00)

☐ Priority Mail Express®

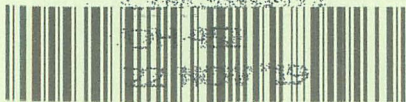
☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery



9590 9402 5149 9122 5882 99

United States
Postal Service

U.S. Southern District of Ohio
Western Division
100 E. Fifth St., Room 103
Cincinnati, OH 45202
ATTN: CLERK OF COURTS

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

SYCAMORE
CINCINNATI
152

NOV 6 2019

